

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)**

SERIAL NO.	09781990	FILING DATE	02/14/01
APPLICANT(S)			

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
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TOTAL IND.	4					
TOTAL DEP.	46					
TOTAL CLAIMS	50					

	IND.	DEP.	IND.	DEP.	IND.	DEP.
51		1				
52	1					
53		1				
54		1				
55	1					
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TOTAL IND.	2		J		J	
TOTAL DEP.	3		J		J	J
TOTAL CLAIMS	5		2/CC 11		1	

BEST AVAILABLE COPY